PAGE 1 / 20 ·

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. The National Rural Electric Cooperative Association Action Committee for Rural Electrification (ACRE) 4301 Wilson Boulevard ADDRESS (number and street) (Check if address is changed) Arlington 22203-1860 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS acreteam@nreca.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2017 C00002972 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Snow, Gabe, , , Type or Print Name of Treasurer Snow, Gabe,,, [Electronically Filed] 10 19 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye Z
Can	ndidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(Damas anatis
(d)		(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised (72/2000		Page 3
Write or Type Committee Name			r age 3
•	ctric Cooperative Association	Action Committee for I	Rural Electrification (ACRE)
	·		<u> </u>
-	Organization, Affiliated Committee, Jo	int Fundraising Representati	ve, or Leadership PAC Sponsor
VALLEY ELECTRIC A	SSOCIATION INC., PAC		
Mailing Address	800 E HIGHWAY 372		
-	PO BOX 237		
	PAHRUMP	NV	89048
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization 🗶 Affiliated Committee	Joint Fundraising Represe	ntative Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number	optional) and position of the	e person in possession of committee
Snow, Gal	oe, , ,		
Full Name	4301 Wilson Blvd		
Mailing Address			
	Adlanta		.22203
	Arlington	VA	
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	703 907 5799
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) o assistant treasurer).	of the treasurer of the committee	ee; and the name and address of
Full Name Snow, Gab	oe,,,		1
of Treasurer	4301 Wilson Blvd		
Mailing Address			
	A.I.		
	Arlington	VA	22203
Title or Position Treasurer	CITY	STATE	ZIP CODE 703 907 5799
		Telephone number	

Full Name of Designated Agent	Lewis, Amy, , ,	
Mailing Address	4301 Wilson Blvd	
	Arlington VA 2220	03
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	urer Telephone number 703 -	907 - 6917
	Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	nolds accounts, rents
Name of Bank, I	Depository, etc.	
	Depository, etc. Wells Fargo & Company	
	Depository, etc.	
Name of Bank, I	Depository, etc. Wells Fargo & Company	
Name of Bank, I	Depository, etc. Wells Fargo & Company	04
Name of Bank, I	Depository, etc. Wells Fargo & Company 420 Montgomery St	04 ZIP CODE
Name of Bank, I	Depository, etc. Wells Fargo & Company 420 Montgomery St San Francisco CA 9410 CITY STATE	
Name of Bank, I	Depository, etc. Wells Fargo & Company 420 Montgomery St San Francisco CA 9410 CITY STATE	
Name of Bank, I	Depository, etc. Wells Fargo & Company 420 Montgomery St San Francisco CA 9410 CITY STATE Depository, etc. Homestead Funds c/o BFDS	
Name of Bank, I	Depository, etc. Wells Fargo & Company 420 Montgomery St San Francisco CA 9410 CITY STATE Depository, etc.	
Name of Bank, I	Depository, etc. Wells Fargo & Company 420 Montgomery St San Francisco CA 9410 CITY STATE Depository, etc. Homestead Funds c/o BFDS PO Box 219486	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraising						
1.			FEC IE	number	C	-
2.			FEC IE) number	С	
3.			FEC IE	number	С	
4.			FEC IE) number	С	
ame of Any Connected (_					-
ACTION COMMITTEE	FOR RURAL ELECT	RIFICATION/MISS	OURI COOPE	RATIVES	(FKA MISSOURI AC	CRE)
Mailing Address	PO BOX 1645					
	JEFFERSON CITY			MO	65102	1 ,
Relationship:		CITY A		STATE A	ZIP COE	DE 🛦
Connected	Organization X Affilia	ited Committee	Joint Fundraisino	g Representa	ative Leadership	PAC S
				g Representa	Leadership	PAC S
esignated Agent: Identify				g Representa	ative Leadership	PAC S
esignated Agent: Identify Full Name				g Representa	Leadership	PAC SI
esignated Agent: Identify Full Name	by name, address (pho	ne number – optiona	i)	g Representa		
esignated Agent: Identify Full Name	by name, address (pho	ne number – optiona	l)	g Representa	Leadership Leadership	
esignated Agent: Identify Full Name Mailing Address	by name, address (pho	ne number – optiona	l)	STATE A		
esignated Agent: Identify Full Name Mailing Address	by name, address (pho	one number – optiona	Telephone N	STATE A umber	ZIP CODE	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (pho	one number – optiona	Telephone N	STATE A umber	ZIP CODE	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank, epository, etc.	by name, address (pho	one number – optiona	Telephone N	STATE A umber	ZIP CODE	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

		FEC ID r		
			umber C	
		I FEC ID r		
			number C	
		FEC ID r	number C	
onnected Organizat	ion, Affiliated Committee, Joint	Fundraising Repre	sentative, or	Leadership PAC Spons
- RURAL ELEC	CTRIC COOPERATIVE	ASSOCIATION	I NRECA	
dress 4301 W	/ILSON BLVD			
ARLING	3TON		VA	22203
o:	CITY ▲	5	STATE A	ZIP CODE ▲
ess				
ess				
	CITY A	ST		ZIP CODE A
POSITION ▼	CITY A	ST Telephone Num	ATE A	ZIP CODE A
	ress 4301 W ARLING ARLING	ARLINGTON Connected Organization Affiliated Committee Affiliated Committee	RURAL ELECTRIC COOPERATIVE ASSOCIATION aress 4301 WILSON BLVD ARLINGTON CITY Connected Organization Affiliated Committee Joint Fundraising Rest. Identify by name, address (phone number – optional)	ARLINGTON CITY ▲ STATE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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ories: List all banks or other depositories in which aintains funds.	trie committee deposits	s runds, noids accounts, rents
suings Light all books as other demandaries in 1994	the committee days ?	o fundo holdo coccusto un la
	elephone Number	
CITY ▲	STATE ▲	ZIP CODE ▲
y by name, address (phone number – optional)		
d Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Spo
CITY A	STATE ▲	ZIP CODE ▲
AIKEN	SC	29802
PO BOX 417		
2790 WAGENER ROAD		
Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponso
	——————————————————————————————————————	C
		C
		C
	Organization, Affiliated Committee, Joint Fundr C COOPERATIVE INC PAC 2790 WAGENER ROAD PO BOX 417 Alken CITY d Organization Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY CITY CITY CITY CITY Telepries: List all banks or other depositories in which	Organization, Affiliated Committee, Joint Fundraising Representative C COOPERATIVE INC PAC 2790 WAGENER ROAD PO BOX 417 AIKEN CITY A STATE A d Organization X Affiliated Committee Joint Fundraising Representative y by name, address (phone number – optional) CITY A STATE A Telephone Number

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spons
BASIN ELECTRIC F	POWER COOPERATIVE POLITICAL ACT	ION COMMITTEE	(BASIN ELECTRIC PAC)
1			
Mailing Address	1717 E INTERSTATE AVE		
	1		
	BISMARCK	ND	58503-0564
		STATE A	ZIP CODE ▲
Relationship:	CITY A		
	d Organization	t Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization X Affiliated Committee Joint		ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization X Affiliated Committee Joint		ative Leadership PAC Sp
esignated Agent: Identif	d Organization X Affiliated Committee Joint		ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization X Affiliated Committee Joint		ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint by by name, address (phone number – optional)		
resignated Agent: Identification Full Name Mailing Address	Affiliated Committee Joint y by name, address (phone number – optional) CITY	t Fundraising Represent	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra		e, or Leadership PAC Spon
Mailing Address	P.O. BOX 1234		
	MONCKS CORNER	sc	29461
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee Joint by pame, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	l Organization, Affiliated Committee, Joint Fundi		
IDAHO ACTION COM	MMITTEE FOR RURAL ELECTRIFICATION-ID	DAHO COOPERATIV	/E UTILITIES ASSOCIATION
Mailing Address	P O BOX 608		
	BURLEY	ID	83342
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)		
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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FEC Form 1S (Revised 02/2017)

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spor
KANSAS ACTION	I COMMITTEE FOR RURAL ELEC	TRIFICATION	
	FOO FACT CARTILACE		
Mailing Address	509 EAST CARTHAGE		
	PO BOX 790		
	MEADE	KS KS	67864
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	d Organization X Affiliated Committee Jo	int Fundraising Representa	ative Leadership PAC S
	by name, address (phone number – optional)		
Full Name			
	by hame, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arme of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arms of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or maintenance of Bank, epository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposit boxes or material depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1		FEC ID number FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
=	d Organization, Affiliated Committee, Joint Fundr		e, or Leadership PAC Spons
LOUISIANA ACT	TION COMMITTEE FOR RURAL ELEC	CTRIFICATION	
			<u> </u>
Mailing Address	10725 AIRLINE HWY		
	BATON ROUGE	LA	70816
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadersnip PAC Sp
	ify by name, address (phone number – optional)	rundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident		rundraising Representa	Leadership PAC Sp
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resignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
resignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Lanks or Other Deposit	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or name of Bank, depository, etc.	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representativ	e. or Leadership PAC Spon
•	ASSOCIATIONS OF MISSISSIPPI ACTION CO	• .	
	POST OFFICE BOX 3300		
Mailing Address	FOST OFFICE BOX 3300		
	RIDGELAND	MS	39158
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Hepresent	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

2		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	• .	e, or Leadership PAC Spons
MONTANA ACTIO	N COMMITTEE FOR RURAL ELEC	CTRIFICATION	1 1 1 1 1 1 1 1 1
Mailing Address	PO BOX 1306		
S .	(501 BAY DRIVE)		
	GREAT FALLS	MT	59403
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Full Name			
Mailing Address			
	▼ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION \			
TITLE OR POSITION \		elephone Number	
	es: List all banks or other depositories in which		s funds, holds accounts, rents
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anks or Other Depositorion defety deposit boxes or main arms of Bank,	es: List all banks or other depositories in which		s funds, holds accounts, rents
anks or Other Depositorie afety deposit boxes or main ame of Bank, epository, etc.	es: List all banks or other depositories in which		s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ig i articipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	l Organization, Affiliated Committee, Joint Fund		
OHIO ACTION COMMITTEE	E FOR RURAL ELECTRIFICATION (ACRE)/OHIO RURAL EL ION	LECTRIC COOPERATIVES	, INC./NATIONAL RURAL ELECTR
I			
Mailing Address	6677 BUSCH BOULEVARD		
	COLUMBUS	, , , OH ,	43229
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		011.11.2	2 0052 2
	Affiliated Committee Joint by by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1	ng Participant:	FEC ID number	C
1.			-1 - 1 - 1 - 1 - 1
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundr		e, or Leadership PAC Spon
OKLAHOMA AS	SOCIATION OF ELECTRIC COOPER	RATIVES-ACRE	
Mailing Address	2325 E I-44 SERVICE RD		
	OKLAHOMA CITY	OK OK	73111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC S
Connect			Leadership 1 AC 5
	ify by name, address (phone number – optional)		Leadership I AC S
esignated Agent: Ident			Leadership TAC S
esignated Agent: Ident			Leadership TAC S
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
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	Organization, Affiliated Committee, Joint Fund		e, or Leadership PAC Spor
SPEAK UP FOR F	RURAL ELECTRIFICATION (SURE)) 	
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	LOUISVILLE	KY KY	40232
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	Mailing Address			
	of Bank, tory, etc.			
	or Other Depositor deposit boxes or ma	ries: List all banks or other depositories in which t intains funds.	the committee deposit	s funds, holds accounts, rents
		Tel	lephone Number	
TI	TLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
Ма	iling Address			
Full	Name			
Design	ated Agent: Identify	by name, address (phone number - optional)		
	Connected	Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
F	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		MAPLE GROVE	MN MN	55369
N	Mailing Address	12300 ELM CREEK BLVD		
		Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
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Mailing Address					
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